DECLARATION F	FOR UTILITY	Attorney Docke	et Number	04645.0558					
DES PATENT AP		First Named In	ventor	Probst et al.					
(37 CF)				COMPLET	IF KNOWN				
			Application Nu	mber					
■ Declaration Submitted OR	☐ Declaration	on I after Initial	Filing Date		January 31, 2001				
with Initial	Filing (su	rcharge	Group Art Unit	-					
Filing	(37 CFR required)	` ''	Examiner Nam	е					
As a below-named inventor, I hereby declare that:									
My residence, post office address, and citizenship are as stated below next to my name.									
I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:									
COMMON CARRIER FOR A CURRENT COLLECTOR									
the specification of which is attached hereto OR (Title of the Invention)									
□ was filed on (MM/DD/YYYY) as United States Application Number or PCT International									
Application Number and was amended on (MM/DD/YYYY) (if applicable).									
I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.									
I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56.									
I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.									
Prior Foreign Application (Numbers)	Country	Foreign Filing (MM/DD/YY)		Priority t Claimed	Certified Copy Attached? YES NO				
				_ _ _					
☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.									
I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.									
Application Number(s) Filing Date (MM/DD/YYYY)									
Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.									

PTO/SB/01 (12/97)

Approved for use through 09/30/00, OMB 0651-0032

*- Please type a plus sign inside this box 🖃

DECEMBER 1011 CHILLY OF DOMEST LABORED TEMPORALISM	DECLARATION -	Utility or	Design	Patent	Application
--	----------------------	-------------------	--------	---------------	--------------------

I hereby claim the benefit under 35 U.S.C. 120 of any United States application(s), or 365(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of 35 U.S.C. 112, I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.

U.S. Parent Application or PCT Parent Number				Parent Filing Date (MM/DD/YYYY)			Parent Patent Numb (if applicable)				
□ A	dditional U.S. o	r PCT intern	national appli	ication numbers	are listed on	a supplen	nental priority d	ata sheet PTO/S	SB/02B att	ached hereto.	THE PROPERTY OF THE PROPERTY O
	inventor, I herel	y appoint th	e following	registered practi	tioner(s) to pr	rosecute ti	his application a	and to transact a	ll business	s in the Patent	and Trademark
☐ Customer Number										ace Customer	
OR ■ Registered practitioner's name/registration number listed belo								_	7	ži.	nber Bar Code Label Here
Registrat Name Numbe					Name				Registration Number		
Ranjana Kadle 40,04 Martin G. Linihan 24,92 Kevin D. McCarthy 35,27			39,336 40,041 24,926 35,278 42,475		R. Kent Roberts Michael F. Scalise Patrick J. Tracy Daniel C. Oliverio Edwin T. Bean, Jr.			5	40,786 34,920 42,187 33,435 16,639		
□Additional	registered pract	itioner(s) na	med on supp	lemental Registe	ered Practition	ner Inforr	nation sheet PT	O/SB/02C attac	hed hereto)	
Direct all correspondence to: ☐ Customer Number or Bar Code Label OR ■ Correspondence address be							ess below				
Name David L. Principe											
Address Hodgson Russ LLP LLP									_		
Address One M&T Plaza, Suite 2000											
City	Buffalo				State	N	New York		1	14203-2391	
Country	United Stat	States Telephone		ne	(716) 856-4000		Fax	C	(716) 849-0349		
further that th	nese statements v	were made w	ith the know	own knowledg vledge that willfi may jeopardize	ul false staten	nents and	the like so mad	e are punishable	by fine o	f are believed or imprisonmer	to be true; and at, or both, under
Name of S	ole or First	Inventor:			☐ A pet	ition ha	s been filed	for this unsig	ned inve	entor	
Given Name (first and middle [if any])					Family Name or Surname						
Joseph M.					1	Probst					
Inventor's Signature			Mober		+]		23 Jun 01	
Residence: City Williamsville		State	NY		Country US		Citizer		US		
Post Offic	e Address										
Post Offic	e Address	188 Sea	brook Dri	ve							
City		William	sville	State	NY		ZIP	14221	(Country	US
■ Addition	nal inventors	are being	named on	the supplem	ental Addit	ional In	ventors shee	t PTO/SB/02	A attacl	hed hereto.	

DECLARATION

ADDITIONAL INVENTOR(S) Supplemental Sheet Page 3 of 3

Name of Additional Joint Inventor, if any:								r		
Given Name (first and middle [if any])					Family Name or Surname					
Richard	McCormick									
Inventor's Signature	Richa	rof)	In Council				Date	24 JAN 61		
Residence: City	East Aurora	State	NY		Country	US	Citizenship	US		
Post Office Address				·						
Post Office Address	869 Lawrence Avenue									
City	East Aurora	State	State NY ZIP 1405			14052	Country	US		
Name of Additional Joint Inventor, if any:							r			
Given Nan	ame (first and middle [if any])					Family Name or Surname				
Inventor's Signature							Date			
Residence: City		State			Country		Citizenship			
Post Office Address										
Post Office Address										
City		State			ZIP		Country			
Name of Additional Joint Inventor, if any:								r		
Given Nam	Given Name (first and middle [if any])				Family Name or Surname					
Inventor's Signature							Date			
Residence: City		State			Country		Citizenship			
Post Office Address										
Post Office Address										
City		State			ZIP		Country			



then the special stress of the second second

the there were there were